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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3A	For	Other Than Ar	n Authorized	d Commit	tee		Office Us	se Only	
NAME OF COMMITTEE (in the community of the community		E OR PRINT ▼		ample: If typer the lines.	oing, type	12FE4	M5		
Committee for A	American S	Sovereignty							
ADDRESS (number and Check if different than previous reported. (AC)	rent	B12 Park Avenue uite 108 ustin				CA	92782	2	
2. FEC IDENTIFIC	ATION NUMB	ER ▼	CITY ▲			STATE A		ZIP CODE	A
C C00614370)		3. IS THIS REPORT	×	NEW (N) OR		AMENDED (A)		
4. TYPE OF REP (Choose One) (a) Quarterly Rep April 15 Quarterly July 15	V	(c) 12-Day	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)		May 20 (M5) Jun 20 (M6) Jul 20 (M7) 2P)	s o	ug 20 (M8) ep 20 (M9) ct 20 (M10) al (12G)	(No Yee De (No Yee)	ov 20 (M11) on-Election ar Only) ec 20 (M12) on-Election ar Only) an 31 (YE)
Quarterly October Quarterly January	Report (Q3)	PRE -Electi Report for		Convention	(12C)	Specia	al (12S)	in the State of	
July 31 M Report (N Year Onl	Mid-Year Non-election	(d) 30-Day POST-Elect Report for		General (3			(30R)		pecial (30S)
(TER)			Election on	11	06	2018	Y	in the State of	
5. Covering Period	10		Y Y Y 2018	through	11 __	/ D D D 26	/ Y Y 201	18	
I certify that I have ex Type or Print Name of	Je	eport and to the bensen, Pamela, , ,	pest of my kno	wledge and	l belief it is tr	ue, correct	and complet	e.	
Signature of Treasurer	Jensen, Pa	mela, , ,		[Electronica	lly Filed] [Date 12	M / 06		2018
NOTE: Submission of fa	alse, erroneous,	or incomplete info	ormation may si	ubject the pe	erson signing t	his Report to	the penaltic	es of 52 U.S	S.C. § 30109
Office Use								FORM lev. 05/2016	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Committee for American Sovereign	nty	
Report Covering the Period: From:	0 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2018		0.00
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	0.00	117.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	0.00	117.00
7. Total Disbursements (from Line 31)	0.00	117.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	17049.36	
This committee has qualified as a multical	andidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name

Committee for American Sovereignty

01 10 2018 11 26 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)..... 0.00 117.00 (ii) Unitemized (iii) TOTAL (add 117.00 0.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 117.00 0.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 117.00 12, 13, 14, 15, 16, 17, and 18(c))....... 0.00 20. Total Federal Receipts 0.00 117.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share		0.00	
(ii) Non-Federal Share		117.00	
(b) Other Federal Operating Expenditures		0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	117.00	
2. Transfers to Affiliated/Other Party Committees	7 7 7	0.00	
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	
Independent Expenditures	4 4		
(use Schedule E)	4 4 4	0.00	
(use Schedule F)		0.00	
6. Loan Repayments Made	0.00	0.00	
7. Loans Made	0.00	0.00	
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
O. Other Disbursements (Including			
Non-Federal Donations)	0.00	0.00	
 Federal Election Activity (52 U.S.C. § 3 (a) Allocated Federal Election Activity (from Schedule H6) 	0101(20))		
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00	
Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		0.00	
. Total Disbursements (add Lines 21(c), 2			
23, 24, 25, 26, 27, 28(d), 29 and 30(c)	0.00	117.00	
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)		0.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	117.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	117.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 6
FOR LINE NUMBER: (check only one)

	9
X	10

OF

NAME OF COMMITTEE (In Full) Committee for American Sovereignty A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll Economic Development Department Taxes Mailing Address P. O. Box 989071 State Zip Code Sacramento CA 96798 Transaction ID: SD10.8060 Outstanding Balance Beginning This Period 656.96 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 656.96 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll **Economic Development Department** Taxes Mailing Address P. O. Box 989071 City State Zip Code Sacramento 96798 CA Outstanding Balance Beginning This Period Transaction ID: SD10.8061 926.92 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 926.92 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll **Economic Development Department** Taxes Mailing Address P. O. Box 989071 City State Zip Code CA 96798 Sacramento Outstanding Balance Beginning This Period Transaction ID: SD10.8062 348.84 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 348.84 1932.72 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER (check only one)

	9
X	10

OF

NAME OF COMMITTEE (In Full) Committee for American Sovereignty A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Interest Economic Development Department Mailing Address P. O. Box 989071 State Zip Code Sacramento CA 96798 Transaction ID: SD10.8087 Outstanding Balance Beginning This Period 43.24 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 43.24 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Penalties and interest on late payroll taxes **Economic Development Department** Mailing Address P. O. Box 989071 City State Zip Code Sacramento 96798 CA Outstanding Balance Beginning This Period Transaction ID: SD10.8121 741.61 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 741.61 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Interest and Penalties on Payroll Taxes **Economic Development Department** Mailing Address P. O. Box 989071 City State Zip Code CA 96798 Sacramento Outstanding Balance Beginning This Period Transaction ID: SD10.8217 223.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 223.00 1007.85 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 8
FOR LINE NUMBER: (check only one)

	9
X	10

OF

NAME OF COMMITTEE (In Full) Committee for American Sovereignty A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll Withholding and Employer Payroll Internal Revenue Service Taxes October 2016 Mailing Address Service Center State Zip Code Ogden UT 84201 Transaction ID: SD10.8056 Outstanding Balance Beginning This Period 5975.91 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5975.91 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll Internal Revenue Service Taxes Nov 2016 Mailing Address Service Center City State Zip Code Ogden UT 84201 Outstanding Balance Beginning This Period Transaction ID: SD10.8057 3690.05 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 3690.05 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll Internal Revenue Service taxes Dec 2016 Mailing Address Service Center City State Zip Code Ogden UT 84201 Outstanding Balance Beginning This Period Transaction ID: SD10.8058 1427.27 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 1427.27 11093.23 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 9
FOR LINE NUMBER: (check only one)

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		9
	X	10

OF

NAME OF COMMITTEE (In Full) Committee for American Sovereignty A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): interest Internal Revenue Service Mailing Address Service Center State Zip Code Ogden UT 84201 Transaction ID: SD10.8086 Outstanding Balance Beginning This Period 75.78 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 75.78 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Interest on balance due Internal Revenue Service Mailing Address Service Center City State Zip Code Ogden UT 84201 Outstanding Balance Beginning This Period Transaction ID: SD10.8120 75.78 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 75.78 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Interest and Penalties on payroll taxes Internal Revenue Service Mailing Address Service Center City State Zip Code Ogden UT 84201 Outstanding Balance Beginning This Period Transaction ID: SD10.8216 2864.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2864.00 3015.56 1) SUBTOTALS This Period This Page (optional)..... 17049.36 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 17049.36 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶